PART B - FEE(S) TRANSMITTAL

Completound send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of th Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
KIRSCHSTEIN, & SCHIFFMILLE 489 FIFTH AVEN	OTTINGER, ISRAE R, P.C. UE	EL MAY 0 8	2006	I hereby certify that	ertificate of Mailing or Trans this Fee(s) Transmittal is bein with sufficient postage for fir all Stop ISSUE FEE address PTC (571) 273-2885, on the c	g deposited with the United st class mail in an envelop
)\59 <u>08_ADF46328</u> -\9900(X0491 10009619	\z	\$	LORING. O	Witkin)	(Depositor's name)
C:1501	1400.00 OP	THE TRADEMARK		MAY 8, 3	MALLE IN	(Signature)
APPLICATION NO.	FILING DATE	FII	RST NAMED INV	ENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/009,619 05/06/2003		Gerhard He		oig	P/63034-PCT	1418
APPLN. TYPE				PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
		\$1400			\$1400 7	05/08/2006
EXAMINER		ART UNIT		CLASS-SUBCLASS	J	
JACKSON, BLANE J Change of correspondence address or indication of "F		2685	2 Formities	455-295000 on the patent front page,	tine //	CHSTEIN WY
PTO/SB/47; Rev 03-02 of Number is required. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN! MARCONI Co	EE DNNUWICATOR	E PRINTED ON THE Elow, no assignee date of this form is NOT a	2 registered pat listed, no name E PATENT (pri ta will appear o substitute for fi 3) RESIDENCE	nt or type) n the patent. If an assig ling an assignment. : (CITY and STATE OR	f no name is 3	
	enclosed: mall entity discount permitte Copies	:d)	Payment by co The Director is	amount of the fee(s) is e edit card. Form PTO-203	8 is attached. arge the required fee(s), or cre	dit any overpayment, to a copy of this form).
a. Applicant claims Si	(from status indicated above MALL ENTITY status. See	37 CFR 1.27. □			ALL ENTITY status. See 37 C	
NOTE: The Issue Fee and Penterest as shown by the reco	ublication Fee (if required) vords of the United States Pate	vill not be accepted fi and Trademark O	on ree (if any) or com anyone other ffice.	r than the applicant; a re	sly paid issue fee to the applica gistered attorney or agent; or the	ition identified above. ne assignee or other party
Authorized Signature		is/quel		Date MA	48,2006 No. 27,564	
Typed or printed name	ALAW ISRAEL		 	Registration	No. 27, 564	
his collection of information	on is required by 37 CFR 1.3	11 The information i	s required to oh	ain or retain a henefit hy	the public which is to file (and minutes to complete, includir comments on the amount of tid I Trademark Office, U.S. Dep SS. SEND TO: Commissioner	I by the USPTO to proces